OCT 16 2007

| Sheet | ı | of | 1 |  |
|-------|---|----|---|--|
|       |   |    |   |  |

| Form PTO-14                       | 49                                              | US Dept. of Comm                                                                           | nerce                       | ATTY     | DOCKET NO.            |                       | A DDI ICAT                  | PION NO                        |  |
|-----------------------------------|-------------------------------------------------|--------------------------------------------------------------------------------------------|-----------------------------|----------|-----------------------|-----------------------|-----------------------------|--------------------------------|--|
| (REV. 1/06)                       |                                                 | PATENT & TRADEMARK OFFICE                                                                  |                             | 119240   |                       |                       | APPLICATION NO. 10/821,964  |                                |  |
| INFORMATION DISCLOSURE STATEMENT  |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
| (Use several sheets if necessary) |                                                 |                                                                                            | APPLICANT(S) Yoichi IMAMURA |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            | FILING<br>April 1           |          | •                     | GROUP<br>1762         |                             |                                |  |
|                                   |                                                 | U.S.                                                                                       | PATENT                      | r docui  | MENTS                 |                       |                             |                                |  |
| Examiner<br>Initials              | Cite<br>No.                                     | Document Number                                                                            | Da                          | ite Name |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       | <u> </u>              | -                           |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       | ·                     |                             |                                |  |
|                                   | -                                               |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            | <del></del>                 |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          | •                     |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          | 71                    |                       |                             |                                |  |
|                                   |                                                 | FOREIG                                                                                     | SN PATE                     | NT DOC   | UMENTS                |                       |                             |                                |  |
| Examiner<br>Initials              | Cite<br>No.                                     | Document Number                                                                            | Da                          |          | Count                 | гу                    | With<br>English<br>Abstract | With<br>English<br>Translation |  |
|                                   | 1                                               | CN 1123341 A 5                                                                             | 5/29/1996                   |          | CHINA                 |                       | х                           |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
| <u> </u>                          |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            | <del></del>                 |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   | C:                                              |                                                                                            |                             | OCUME    |                       |                       |                             |                                |  |
| Examiner<br>Initials              | (morating ritter, Pate, Fertillent Lages, etc.) |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             | - 18     |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            | <del></del>                 |          | <u> </u>              |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       |                       |                             |                                |  |
|                                   |                                                 |                                                                                            |                             |          |                       | -                     |                             |                                |  |
| EXAMINER                          |                                                 | I                                                                                          |                             |          |                       | DATE CO               | ONSIDERED                   |                                |  |
| Examiner:                         | Initial if c                                    | citation considered, whether or not citation considered. Include copy of this form with ne | is in con                   | formance | with M.P.E.P. 609; dr | raw line through cita | tion if not in              | conformance                    |  |

Date: October 16, 2007